

**TOWN OF HARPSWELL**

**P.O. Box 39**

**Harpswell, ME 04079**

**PROPERTY TAX ASSISTANCE PROGRAM**

**Reimbursement for the 2018 State Property Tax Fairness Credit**

**Application Deadline – October 15, 2019**

Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Map and Lot Number (on Property Tax Bill): \_\_\_\_\_

If different from property address please provide mailing address below:

\_\_\_\_\_

Please answer the following questions:

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| 1. Has the applicant owned or rented a home in the Town of Harpswell at the time of application and for the entire year prior to the date of application?         | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has the applicant filed Form 1040ME and the Property Tax Fairness Credit (PTFC) for 2018? <u>If yes, provide confirmation of credit (copy of your 1040ME).</u> | <input type="checkbox"/> | <input type="checkbox"/> |

**If you prefer the Town to obtain the information directly from the Maine Revenue Service on your behalf, please complete the attached permission form.**

- |  |                          |                          |
|--|--------------------------|--------------------------|
| 3. If the applicant is a Harpswell homeowner, has he/she applied for a homestead?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Has the applicant (if owner) paid the 2018 property taxes in full?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. If you paid rent in 2018, list your landlord's name and telephone number and provide a copy of lease or, if no lease, other evidence of rental: _____ |                          |                          |

**I declare that I have examined this application and to the best of my knowledge and belief, it is true, correct and complete.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

If you need any assistance with the completion of this form please contact the Deputy Town Administrator Terri Sawyer at 833-5771.

PERMISSION FORM – only complete if you want the Town to obtain your refund information directly from the Maine Revenue Services.

Town of Harpswell Property Tax Assistance Program supplementary permission form for seeking Property Tax Fairness Credit information from the State on the behalf of the applicant:

I hereby authorize Maine Revenue Services (MRS) to provide information relative to my Property Tax Fairness Credit to the Town of Harpswell. I understand that the information provided by MRS will include the full amount of the credit for which I was eligible. MRS will provide the credit information only if this form has been signed by the credit recipient. The information so provided is intended to be used solely for the purpose of determining my eligibility under the Town of Harpswell's Property Tax Assistance Ordinance. The Town of Harpswell agrees upon receipt of this form and under penalties of applicable law to hold all taxpayer information contained in this form in strict confidence under applicable laws and to use the information contained in this form strictly for the purposes stated herein.

Year for which the information is being sought: 2018

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Social Security #

Property address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_